ALLERGIC REACTION/ANAPHYLAXIS

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ACTION/TREATMENT:

ABCs/monitor cardiac rhythm.

IV access, rate titrated to perfusion as needed.

Allergic Reaction (mild: rash, urticaria):

Diphenhydramine: 25-50 mg IVP or deep IM.

Allergic Reaction (acute: facial/cervical angioedema or wheezing):

Epinephrine 1:1000:
Albuterol (for wheezing):
3 ml (2.5 mg) of a 0.083% solution nebulized.

May repeat once.

Diphenhydramine: 25-50 mg IVP or deep IM.

Anaphylaxis (severe: hypotension, severe wheezing, respiratory distress):

Epinephrine 1:1000 0.3 mg SQ.

- Epinephrine 1:10,000 for patients with absent palpable pulses or impending airway obstruction:

0.1-0.3 mg slow IVP.

Subsequent doses may be repeated as needed.

Albuterol: 3 ml (2.5 mg) of a 0.083% solution nebulized.

May repeat once.

Diphenhydramine: 25-50 mg IVP.

Dopamine: (400 mg/250 NS) 2-20 mcg/kg/min titrated to perfusion.

Pediatric:

Allergic Reaction (mild: rash, urticaria):

Diphenhydramine: 1 mg/kg IVP or deep IM.

Allergic Reaction (acute: facial/cervical angioedema or wheezing):

Epinephrine 1:1000: 0.01 mg/kg SQ up to 0.3 mg maximum

May repeat once in 20 minutes.

Albuterol (for wheezing):
 3 ml (2.5 mg) of a 0.083% solution nebulized.

May repeat once.

Diphenhydramine: 1 mg/kg IVP or deep IM

Anaphylaxis (severe: hypotension, severe wheezing, respiratory distress):

Epinephrine 1:1000
 0.01 mg/kg SQ up to 0.3 mg maximum.

Epinephrine 1:10,000 for patients with absent palpable pulses or impending airway obstruction:

0.01 mg/kg slow IVP; maximum single dose 0.1 mg

Subsequent doses may be repeated as needed.

Albuterol: 3 ml (2.5 mg) of a 0.083% solution nebulized.

May repeat once.

Diphenhydramine: 1 mg/kg IVP.

Dopamine: (80 mg/250 NS)
 5-20 mcg/kg/min titrated to perfusion.

Note: For a patient with history of hypertension, coronary artery disease, or BP > 150: – use Epinephrine only in life-threatening situations and use lower dose.

Shaded test indicates BH order

Approved:

Unshaded text indicates standing order

Treatment Guidelines::medical:M-15
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